

Governor's Commission for a Drug Free Indiana

A Division of the



Comprehensive Community Plan

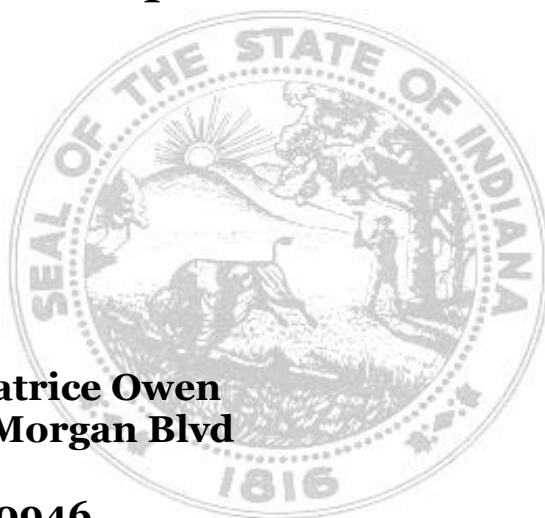
County: Porter County

LCC: Porter County Substance Abuse Council

Date Due: May, 2015

Date Submitted: May, 2015

New Plan Plan Update ✓



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Plan Summary

Mission Statement:

The Porter County Substance Abuse Council's mission is to reduce youth and adult substance abuse by assessing for, promoting through, and educating about effective community-based programs.

History:

Coalition members of the Porter County Substance Abuse Council have been fighting substance abuse for 26 years. The Substance Abuse Council is made up of the county schools, city police departments (including the Sheriff's department and the Indiana State Police, Excise Police and National Guard), treatment facilities, social services agencies, halfway houses, concerned citizens and others. The coalition meets every other month, January, March, etc., at the Porter County Sheriff's Department. The Annual Meeting is held in December at the Sheriff's Department.

There are five committees that actively meet during the year. The Drunk Driving Task Force meets every month except December when it has its officer recognition event. Red Ribbon holds events throughout the year including contests and a recognition event. The Comprehensive Community Plan Committee meets to discuss the CCP, collect data, review the plan and confirm it is addressing the problems in the county. The Membership Committee meets to increase members, address member concerns, and help members serve the coalition. The DFC Committee helps the coalition meet the needs of the federal DFC grant and the many environmental strategies we are providing in our community.

Porter County is located in Northwest Indiana, one hour southeast of Chicago, Illinois. We are on the southern tip of Lake Michigan between Lake and La Porte Counties. According to the 2010 Census, Porter County had a population of 165,682. Valparaiso is the county seat with the cities of Portage, Chesterton, Burns Harbor and Porter in the northern half of the county and Hebron and Kouts in the southern part of the county.

In the County rankings, a measure of healthful living produced by the Robert Wood Johnson Foundation, Porter County ranks 14 out of 92. The county has moved up from a previous ranking of 20. The proportion of alcohol-impaired driving deaths is 31%, noticeably higher than the state average of 26% and in terms of ranking in the state, the county is almost in the lowest

quarter. In addition, the county is in the lowest 25% for binge/excessive drinking. The locally produced Quality of Life Indicators noted in its 2012 Report, “On health outcomes in 2010, including death and disease rates, Porter County ranked 16th of the 92 counties. On other health factors including healthy behaviors, clinical care, socioeconomic status and physical environment Porter County ranked 13th.” This report reviews the Northwest Indiana region and reports, “27 percent of adults in the region smoke on average over the three year period. 17 percent of adults were excessive drinkers.” In terms of education, Porter County students pass ISTEP in Math and Language Arts in 8th and 10th grades at a higher level than the state average. In 2012 the per capita income in the county was just over \$40,000, about the national average and well above the state average of \$34,398. Again, from the Quality of Life report, “in 2010, Northwest Indiana accounted for 11.9 percent of Indiana’s population and its population has increased by 4.1 percent since 2000. But most of that increase has been in Porter County.”

Summary of the Comprehensive Community Plan:

This Comprehensive County Plan covers four problem statements. The four statements cover the three program areas: prevention/education, intervention/treatment and justice/enforcement. The fourth statement covers a more county-wide over-arching plan for community-wide strategies. Programs overlap and coalesce as the need arises.

The Porter County Substance Abuse Council views this plan as one of many means answering the substance abuse problem in our community. In order to combat the problem it will take a county. This Comprehensive Community Plan acts as the overall strategy connecting all of the good work that is being done in the county.

Membership List

County LCC Name:

#	Name	Organization	Race	Gender	Category
1	Gloria Guerrero	Duneland School Corporation		F	Education
2	Dolores Mueller	Kouts Police Department		F	Law Enforcement
3	Tim Kunstek	Portage Township Schools		M	Education
4	Kristine Prater	Porter Township Schools		F	Education
5	Ana Brocksmith	Union Township Schools		F	Education
6	Jennifer Hippie	Valparaiso Community Schools		F	Education
7	Kathy Flores	Alice's House		F	Treatment/Self-help
8	Mark Jones	Boys & Girls Club of Porter County		M	Civic Organization/Youth
9	Kathy Cuevas	Care Counseling		F	Treatment
10	Mark Dranger	Choices! Counseling Services		M	Treatment
11	Tom Moeller	Family & Youth Services Bureau		M	Treatment/Youth
12	Derek Frazier	Frontline Foundations		M	Treatment
13	Michelle Volk	Great Lakes Labs		F	Business
14	Jennifer Harkel	Porter County Health Department		F	Government
15	Don Dratwa	Moraine House		M	Treatment/Self-help
16	Lita Peters	Respite House		F	Treatment/Self-help

17	Sarah Bernard	New Beginnings		M	Treatment
18	Jeremy McHargue	Burns Harbor Police Department		M	Law Enforcement
19	Dave Lohse	Chesterton Police Department		M	Law Enforcement
20	Joshua Noel	Hebron Police Department		M	Law Enforcement
21	Michelle Quarles	Indiana National Guard		F	Government
22	Brant Mendenhall	Indiana Excise Police		M	Law Enforcement
23	Ann Wojas	Indiana State Police		F	Law Enforcement
24	Dale Marshall	Kouts Police Department		M	Law Enforcement
25	Tim Beach	Ogden Dunes Police Department		M	Law Enforcement
26	Stephanie McFadden	PACT		F	Government/Self-help/Treatment
27	Chris Buyer	Juvenile Probation		M	Justice
28	Robert Nichols	Portage Police Department		M	Law Enforcement
29	April Russ	Porter County Adult Probation		F	Government
30	Ryan Rowan	Porter County Prosecutor's Office		M	Judiciary
31	Larry LaFlower	Porter County Sheriff's Department		M	Law Enforcement
32	Mike Grennes	Valparaiso Police Department		M	Law Enforcement
33	Jacquelyn Sterling	Porter County Red Ribbon Campaign		F	Civic Organization
34	Cecilia Ballard	Celebrate Recovery – Nazarene		F	Religion

		Church			
35	Tracy Traut	TrautPointo		F	Treatment
36	Brenda Sheetz	Porter County Community Foundation		F	Community Organization
37	Beth Caldwell	Gateway Foundation		F	Treatment
38	Natalie Rivich	Tobacco, Education, Prevention Coalition		F	Community Coalition
39	Heather Hitz	Empower Porter County		F	Community Organization
40	Cindy Standiford	Housing Opportunities		F	Community Organization
41	Aja Strominski	Into the Light		F	Community Organization
42	Marty Vagenas	Fresh Start		F	Treatment
43	Bradley Campbell	Prevention Awareness Network		M	Media
44	Rayanna Henderson	Porter Health		F	Healthcare
45	Mike Stephens	Union Township Schools		M	Schools
46	Joy Sunday	Valparaiso Community Schools		F	Schools
47	Doris Amling	Porter County Coroner's Office		F	Government
48	Joseph Torok	Porter Police Department		M	Law Enforcement
49	John Ryan	Portage Police Department		M	Law Enforcement
50	Taye Leftridge	Flint Lake PTO		F	Parents/schools
51	Chris George	East Porter Schools		M	Schools
52	Rachel Murray	Portage Township Schools		F	Schools
53	Kaye Frattacia	Empower		F	Community Organization

54	Kathleen Strohback	Indiana State Parole		F	Justice
55	Marilyn Marion	Care Counseling		F	Treatment
56	Kevin Glisic	Moraine House		M	Civic
57	Christian Gabrano	Concerned Citizen		M	Civic
58	Jaime Bauer	Positive Approach to Teen Health		F	Education
59	Aaron Kochar	Porter Starke		M	Treatment
60	Rick McCall	United Steelworkers		M	Industry

Problem Identification

A. Problem Statement #1: Porter County experiences a high incidence of transportation, availability, accessibility and abuse of illegal substances, controlled substances and mind-altering substances. Crimes associated with supporting substance abuse habits have increased.

B. Supportive Data:

1. In 2012, 0.38% of the US population was arrested for driving under the influence (DUI). In 2012, in Porter County, 0.72% of the general public was arrested for DUI. Porter County experiences a large number of annual DUI arrests:

Year	DUI Arrests
2007	1169
2008	1148
2009	926
2010	978
2011	1028
2012	1200

2012 DUI Arrests		% of	
	Arrests	Population	Population
TOTAL	1,171,935	311,601,890	0.38%
Porter County	1,200	165,682	0.72%

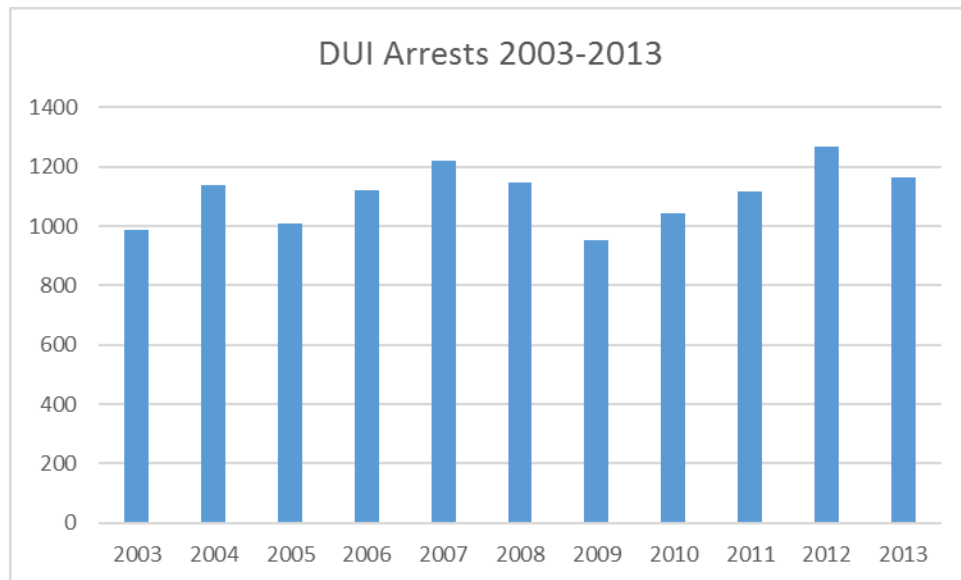
2. In Porter County we have a preponderance of crimes associated with substance abuse. The following chart shows the elevated numbers and increasing numbers for adult alcohol and drug arrests. When compared to the National numbers the Porter County figures are high. Over 1% of the total Porter County adult population is arrested for alcohol offenses. Nationally the figure is 0.3%. In every measure

Porter County is above the national average. Note the high figures for thefts and burglaries.

		Alcohol Arrests	Juvenile alcohol arrests	Adult drug arrests	Juvenile drug arrests	Tobacco violation arrests	Robberies	Thefts	Burglaries
YEAR									
2012									
TOTAL	1749	162	1039	163	86	14	1662	674	
	1.06%	0.10%	0.63%	0.10%	0.05%	0.01%	1.00%	0.41%	
2011									
TOTAL	1631	218	872	180	77	13	1901	751	
	0.98%	0.13%	0.53%	0.11%	0.05%	0.01%	1.15%	0.45%	
2010									
TOTAL	1637	254	751	164	72	26	1517	325	
	0.99%	0.15%	0.45%	0.10%	0.04%	0.02%	0.92%	0.20%	
		Alcohol Arrests	Juvenile alcohol arrests	Adult drug arrests	Juvenile drug arrests	Thefts	Burglaries		
YEAR									
2011	935,149.00	99,717.00	1,382,507.00	148,744.00	82,903.00	1,011,150.00	234,735.00		
	0.30%	0.03%	0.44%	0.05%	0.03%	0.32%	0.08%		
2010	966,094.00	107,414.00	1,468,272.00	170,574.00	85,115.00	990,346.00	224,565.00		
	0.31%	0.03%	0.47%	0.05%	0.03%	0.32%	0.07%		

- In 2012 Indiana Excise Police conducted 200 alcohol compliance checks and 97 tobacco compliance tests. These test the establishment's conformance to state laws governing serving and selling alcohol and tobacco to minors. Respectively the rates were 9% and 4% failure. Indiana's laws relating to underage drinking are more stringent than most other states therefore a nationwide comparison is unavailable. Locally we would like to see the numbers reduced to 0%.

End of Year 1 Update:



1.

There was a decrease in the number of DUI arrests from 2012 to 2013. The problem still remains.

2.

YEAR	Juvenile alcohol arrests	Juvenile drug arrests	Tobacco violation arrests	Robberies	Thefts	Burglaries
2014						
Burns Harbor	4	0	0	1	29	1
Chesterton	17	21	8	0	151	20
Hebron	5	6	0	0	18	1
Kouts	0	0	0	0	20	3
Ogden						
Dunes	1	0	0	0	11	0
Portage	15	56	93	7	631	99
Porter	0	3	0	0	60	8
Sheriff's Dept.	39	7	4	7	368	113
Valpo	25	23	5	7	506	55
TOTAL	106	116	110	22	1794	300
	0.06%	0.07%	0.07%	0.01%	1.08%	0.18%

2013

Burns Harbor	0	0	0	0	48	2
Chesterton	11	17	8	2	121	40

Hebron	15	18		0	38	2
Kouts	2	0	0	0	14	0
Ogden Dunes	2	0	0	0	9	2
Portage	38	60	22	13	697	124
Porter	0	0	0	0	62	7
Sheriff's Dept.	60	13	9	6	582	186
Valpo	37	35	1	7	530	85
TOTAL	165	143	40	28	2101	448
	0.10%	0.09%	0.02%	0.02%	1.27%	0.27%

2012						
Burns Harbor	0	0	0	0	37	3
Chesterton	6	8	10	2	146	40
Hebron	7	4	6	0	46	4
Kouts	1	0	0	1	14	2
Ogden Dunes	3	0	0	0	11	2
Portage	59	75	40	3	50	272
Porter	0	1	0	1	54	14
Sheriff's Dept.	29	11	8	2	659	184
State PD						
Valpo	57	64	22	5	645	153
TOTAL	162	163	86	14	1662	674
	0.10%	0.10%	0.05%	0.01%	1.00%	0.41%

2011						
Burns Harbor	0	0	0	1	40	4
Chesterton	5	9	10	1	176	54
Hebron	36	12	0	0	66	10
Kouts	1	1	0	0	16	1
Ogden Dunes	3	4	0	0	7	0
Portage	86	64	44	3	25	330
Porter				0	68	31
Sheriff's Dept.	48	15	21	3	718	176
State PD						
Valpo	39	75	2	5	785	145
TOTAL	218	180	77	13	1901	751
	0.13%	0.11%	0.05%	0.01%	1.15%	0.45%

2010						
Burns Harbor	1	4		0	35	4
Chesterton	18	6	14	3	224	48
Hebron	11	10		1	38	3
Kouts	4	4		0	13	0
Ogden Dunes	4	0		0	2	1
Portage	87	66	44	3	257	30
Porter						
Sheriff's Dept.	84	20	7	5	280	127
State PD						
Valpo	45	54	7	14	668	112
TOTAL	254	164	72	26	1517	325

- 0.15% 0.10% 0.04% 0.02% 0.92% 0.20%
3. In 2014 there were a total of 320 alcohol compliance checks conducted in Porter County by the Excise Police. Of these 26 violations were written, 55 had no action taken and 239 passed the inspection. In addition, Excise Police conducted 16 tobacco checks with no sales violations.

End of Year 2 Update:

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Final Update (end of Year 3):

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C. Goals:

1. Increase awareness of substance abuse and crimes associated with substance use/abuse.
2. Reduce transportation, availability, and accessibility of illegal substance, controlled substances and mind-altering substances.
3. 100% compliance of businesses selling mind-altering substances to minors, by 10/2016.

End of Year 1 Annual Benchmarks:

1. There has been a decrease in crimes in Porter County.

	Robberies	Thefts	Burglaries	TOTAL
2010	26	1,517	325	1,868
2011	13	1,901	751	2,665
2012	14	1,662	674	2,350
2013	28	2101	448	2,577
2014	22	1794	300	2,116

2. The Porter County Drug Task Force has been especially effective in reducing availability of illegal substances. New this year are Fentanyl patches, LSD and an increase in the overall number of pills confiscated by the task force. Xanax remains the clear leader in our community in terms of illicit prescription medications.

	2013	% of Total	2014	% of Total
Depressants	626	46%	869	37%
Painkillers	676	49%	867	37%

Stimulants	57	4%	385	16%
Other	11	0.8%	241	10%
TOTAL	1370		2362	

3. The number alcohol violations indicate that we need to continue working on this goal. The rate of violations this past year was just over 8%.

End of Year 2 Annual Benchmarks:

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Final Report (end of Year 3):

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D. Objectives:

1. Maintain the efforts of the Drunk Driving Task Force.
2. Support drug interdiction programs in the county schools through the use of drug dogs and resource officers.
3. Continue to support the Porter County Drug Unit, HIDTA, and other law enforcement organizations and task forces.
4. Support the use of equipment and methods that will enhance the arrest of a drug or alcohol offender.
5. Continue to support the use of canine units.
6. Maintain, encourage and support the use of cellular phones to report impaired drivers.
7. Encourage school districts to participate in statistical surveys or collection of data to measure effectiveness of current programs and identification of at risk students.
8. Support a media campaign to educate parents/adults as to their responsibilities and the economic deterrents relative to purchasing alcohol for minors.
9. Support education/awareness programs regarding the use/abuse of prescription drugs and OTC medications.
10. In order to decrease availability/accessibility, support harsher laws and stricter enforcement pertaining to adults who enable underage substance abuse.
11. Support and maintain prescription drop off locations throughout the county.
12. Support additional DUI patrols throughout the county.
13. Encourage prosecutors and judges to seek and impose maximum sentences on drug and alcohol-related offenses.

End of Year 1 Update:

1. The Drunk Driving Task Force was active in the community in 2014. Their website remains popular; it shares information and gives updates. The task force went to

- one school with the Goggles & Carts program (the other cancelled due to rain). They had a Price of the Party advertisement in a local paper. The task force was able to fund 61 additional patrols on the roads making 32 DUI arrests.
2. We support the drug interdiction programs. All Porter County schools have access to a resource officers and drug dogs.
 3. PCSAC supports the Drug Task Force, HIDTA, and other task forces as needed. In addition we are working with our local HIDTA, providing information about local conditions.
 4. We provided funding for drug testing kits for one police department, PBT units for two departments, and the Antabuse TruTouch equipment for alcohol offenders.
 5. We grant funded one canine unit and canine program drug safe.
 6. We encourage citizens to report drunk drivers.
 7. We encourage school districts to participate and now all do complete the ATOD survey.
 8. We support campaigns that address parents. We did a complete overhaul of the Parent Guidebook. This book is distributed to all schools for parents registering incoming 6th graders.
 9. Members gave several presentations on the problem of prescription medication abuse. One program was for the Emergency Nurses Association of Northern Indiana, one to a local school district personnel before the start of school and staff gave a presentation at IUN.
 10. We support harsher penalties for people who enable children in their use.
 11. We continue to support the five drug drop-off locations around the county.
 12. We support additional patrols. We funded an additional 61 patrols in the county.
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End of Year 2 Update:

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Final Update (end of Year 3):

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A. Problem Statement #2: Porter County has a higher percentage of adolescent and adult substance abuse than other counties in Indiana. This behavior often begins during grade, middle and high school years. Porter County has insufficient cost-effective treatment alternatives and/or services available to provide a recovery-oriented option for treatment and rehabilitation of individuals who use, abuse or are dependent upon substances.

B. Supportive Data:

1. According to the 2011 epidemiologic profile, we have a high need for alcohol prevention: the county received an alcohol priority score of 14, placing us in the top 10 of the 92 counties. The ATOD Survey shows that 6th through 8th graders show significantly higher use of illegally obtained prescription pills, use of alcohol, binge drinking, marijuana, crack, inhalants, methamphetamines, steroids, hallucinogens, and over the counter drugs. In addition to these, 9th graders show higher percentage of lifetime use for crack, inhalants, heroin, methamphetamines, steroids, and hallucinogens and statistically significant increases in alcohol, marijuana, cocaine, ecstasy, over the counter drugs and prescription drugs.
2. According to the National Institute on Drug Abuse, treatment helps addicted individuals stop drug seeking and using. In addition, “addiction is a chronic disorder characterized by occasional relapses, a short-term, one-time treatment is usually not sufficient.” In Porter County we have 3 long-term half-way houses with a total of 45 beds. There are no inpatient treatment facilities in the county. There is not a detox center in the county (although anecdotally people detox at the county jail). There are over 8 treatment facilities in the county. According to the 2012 National Survey on Drug Use and Health, nationally 7.9 percent of the population (12 and over) needing treatment did not receive it. In the last full year of funding the Council funded treatment for 177 individuals at 5 of the 8 treatment facilities. One facility sees over 5,000 clients a year but the majority of those clients are for mental health services. Using the national statistic of 7.9% the county would need services of over 11,000 people. The 8 facilities are incapable at this juncture of providing those services.

End of Year 1 Update:

1. The aforementioned state epidemiological report was updated in 2013. Indicators show that alcohol use in the areas of Youth consumption, Binge Drinking, Heavy Drinking and DUI's for both adults and juveniles were found to be more in line with United States averages than in the previous study. However, the report also showed that at the time of admission for those Indiana residents in substance abuse treatment, the percentage using marijuana was significantly higher (46.9%) than the rest of the nation (38.2%). The highest percentages of marijuana use were found among males and individuals under the age of 18. Over one-fifth of Hoosiers in treatment (20.9%) reported marijuana dependence, a percentage significantly higher than the nation's (18.0%). The same epidemiological report cited significant increases between 2000–2011 in the percentage of treatment admissions in Indiana reporting meth dependence. In fact, the Indiana State Police seized 1,721 clandestine methamphetamine labs in 2013; this represents the highest number of lab seizures thus far. The updated report also revealed that compared to the nation, Indiana's rates for prescription drug abuse and dependence were significantly higher for overall prescription drug, pain reliever, sedative/tranquilizer, and stimulant abuse. The previously referenced ATOD Survey was updated in 2014 and revealed many decreases in substance use for the 6th to 8th grade population compared to the previous ATOD survey. For example Porter County Schools showed lower percentages of use than the state average for

Monthly Alcohol Use, Binge Drinking for 7th and 8th graders and Monthly Marijuana Use for 8th graders. However, Porter County has higher than state percentages for Monthly Alcohol Use by 11th graders, Binge Drinking by 11th and 12th graders and Monthly Marijuana Use by 11th and 12th graders. In fact, the local percent of 12th grade students using Marijuana on a monthly basis is higher than the national average.

2. Porter County continues to have 3 long-term half-way houses with a total of 45 beds. There have been no detoxification centers nor any inpatient treatment facilities established within the county during the first year of the Comprehensive Community Plan. During the past year, the number of treatment facilities within Porter County has decreased as one agency is no longer in existence. However, on a positive note, the number of individuals receiving treatment that was funded by the Substance Abuse Council has increased from 177 to 194. Despite this promising increase, there continues to be a shortfall of the service providers necessary to meet the county's needs.

End of Year 2 Update:

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Final Update (end of Year 3):

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C. Goals:

1. To support a variety of evidence based substance abuse treatment programs and to have these programs be available to Porter County residents who need them.
2. To reduce the number of chemically dependent Porter County residents, reducing the number of criminal offenses, reducing the percentage of users, and/or the number of deaths related to substance abuse.

End of Year 1 Annual Benchmarks:

1. The Porter County Substance Abuse Council has been able to support, both monetarily and in its efforts, substance abuse treatment programs with a basis for effectiveness that have benefited the residents of Porter County. These include, but are not limited to, *Alcohol and Drug Defense Program, Strengthening Families,*

Passport to Manhood, Natural Helpers, the Drunk Driving Task Force, Intensive Outpatient and Relapse Prevention Programs.

2. The Substance Abuse Council continues to work toward this goal of reducing chemically dependent individuals. This is done through community education, the programming the council supports and through support of the use of substances such as Naloxone and other opioid antagonists.

End of Year 2 Annual Benchmarks:

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Final Report (end of Year 3):

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D. Objectives:

1. To build and enhance community awareness of the various substance abuse treatment options in Porter County.
2. To develop and utilize the PCSAC website as an on-going resource for substance abuse information including:
 - a. Education programs
 - b. Certified professionals providing clinical assessment
 - c. Treatment programs
 - d. Support groups
 - e. Facilities offering medical detoxification
 - f. Inpatient treatment facilities
3. To develop a relationship with Healthcare Providers and to begin a collaboration of efforts in the early detection and intervention of potential substance abuse in children and young adults. This can be initiated with an introduction and written materials provided by the PCSAC.
4. Support treatment and education for indigent individuals.
5. To develop, support, maintain and/or expand evidence based treatment programs for all age and socioeconomic groups in Porter County.
6. To recognize and assure that treatment programs address Dual Diagnosis in addicted individuals.
7. To support the establishment of a medical detoxification program and to strive for a short term inpatient program in Porter County.
8. To develop and support future expansion of residential services for men and women in Portage.
9. Support community programs that focus on rehabilitation and behavior modification.

10. Promote cooperation between justice and treatment areas to ensure that all substance abuse offenders are accountable for obtaining appropriate treatment and responsible for covering the cost of their treatment.
11. Continue awareness campaigns for consequences of alcohol, tobacco, prescription drug, synthetic drugs and other drug abuse. This would include the parent guidebook, newspaper educational campaigns, drug kits for sale to parents and others.
12. Re-evaluate, revise, print and distribute the parent guidebook.
13. Promote and support addiction services for incarcerated individuals.
14. Continue to support the Porter County Adult and Juvenile Drug Courts.
15. Work in conjunction with the criminal justice system to support progressive penalties for repeat offenders of drug/alcohol arrests and provide alternatives to prosecution and incarceration for substance abuse offenders.

End of Year 1 Update:

1. The Substance Abuse Council has enhanced community awareness of the available substance treatment options through the services provided by the coalition such as the advertisement of drug testing kits, the Parent Guide Book and the numerous community activities/symposiums presented by the council.
2. The Substance Abuse Council has finalized the creation of the PCSAC website and continues to develop, utilize and improve the site. The website has been used to relay information to the community and coalition members regarding upcoming events. The website address has been printed on all the council's business cards.
3. The Substance Abuse Council has sought to engage healthcare providers in the community by inviting them to become active members of the coalition. The council has also sought avenues to provide information in the form of fliers and printouts.
4. The Substance Abuse Council has supported treatment for indigent individuals through the multiple grants supporting local programming and counseling for this population. Examples of this include assistance provided to Moraine House, Family and Youth Services Bureau and Care Counseling
5. The council has supported evidence based treatment programs such as Strengthening Families and IOP. Additionally, the council continues to encourage all treatment providers to seek programming that is rooted in evidence based philosophy.
6. This objective continues to be a work in progress. The council is aware of the need and continues to work toward this objective.
7. This continues to be an unmet objective in Porter County. However, the council continues to support the availability of a medical detoxification program for the residents of Porter County.
8. Residential services for men and women continues to be an area of need in the city of Portage. The council continues to recognize this need and supports the future expansion of these services.
9. The Substance Abuse Council supported the Alcohol and Drug Defense Program, Strengthening Families, Red Ribbon Campaign, Drunk Driving Task Force. In addition, the council funded programs addressing substance assessment, drug screening, sobriety monitoring and relapse prevention.

10. The Substance Abuse Council continues to encourage the courts, and prosecutor(s) to hold substance abuse offenders accountable for following through with court ordered treatment such as counseling, IOP, Victim Impact Panel.
11. The council supported and/or planned community awareness programs such as Red Ribbon Campaign, the Drunk Driving Awards as well as supported hospital screens for tobacco use and the offering of cessation classes. In addition, the council sponsored Social Host trainings.
12. The Substance Abuse Council has maintained and continues to distribute an up-to-date parent guidebook.
13. The council supports IOP programs being offered in the Porter County Jail and the opportunity for substance dependent individuals to receive said programming while awaiting pending court proceedings.
14. The council continues to support both the Adult and Juvenile drug courts and recognizes the very important role that problem solving courts play within the justice system.
15. The coalition continues to support progressive penalties and alternatives to incarceration for substance abuse offenders.

End of Year 2 Update:

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Final Update (end of Year 3):

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A. Problem Statement #3: In Porter County we have a high rate of substance use and youth are starting at a younger age.

B. Supportive Data:

1. According to the 2011 epidemiologic profile, Porter County Is a community with a high need for alcohol prevention: the county received an alcohol priority score of 14 which placed us firmly in the top 10 counties for alcohol related problems. The study indicated that our sixth graders show significantly higher use with illegally obtained prescription pills, higher usage than state average for our 8th grades in alcohol, binge drinking, marijuana, crack, inhalants, methamphetamines, steroids, hallucinogens, prescription drugs and over the counter drugs. By 9th grade the students show a higher percentage of lifetime use for crack, inhalants, heroin, methamphetamines, steroids, and hallucinogens and statistically significant

increases in alcohol, marijuana, cocaine, ecstasy, over the counter drugs and prescription drugs. Our region is second in the state of such significant increase.

2. Refer back to the supporting information for Problem Statement 1 – arrests for juveniles (alcohol and drugs) are twice the national average.

	Juvenile alcohol arrests	Juvenile drug arrests	Tobacco violation arrests
2012			
<i>Burns Harbor</i>	0	0	0
<i>Chesterton</i>	6	8	10
<i>Hebron</i>	7	4	6
<i>Kouts</i>	1	0	0
<i>Ogden Dunes</i>	3	0	0
<i>Portage</i>	59	75	40
<i>Porter</i>	0	1	0
<i>Sheriff's Dept.</i>	29	11	8
<i>State PD</i>			
<i>Valpo</i>	57	64	22
TOTAL	162	163	86

End of Year 1 Update:

1. Alcohol continues to be our number one problem. In 2013 the IUPUI's Center for Health Policy noted that the Priority Score for alcohol for Porter County is 200. The county is in the top 10% and ranks lower in score than only 7 other counties in the state. In addition, there were 6 alcohol-related automobile fatalities in the county in 2014. The 2013 Epidemiological Report shows that there has been an overall decline in the use of alcohol by youth. Incidence of marijuana use by youth went down in 2013 but the perception of harm is also declining. Preliminary information for 2014 shows a corresponding increase in the use (corresponding to the reduction in perception of harm). Heroin and opiate use is on the decline but it is still higher than the state average. Preliminary information for 2014 shows that 3.3% of high school seniors in the county had used heroin in their lifetime; this is 17.8% more than the state average.
2. Juvenile arrests remain high, but are going down.

YEAR	Juvenile alcohol arrests	Juvenile drug arrests
2014		
<i>Burns Harbor</i>	4	0
<i>Chesterton</i>	17	21

<i>Hebron</i>	5	6
<i>Kouts</i>	0	0
<i>Ogden Dunes</i>	1	0
<i>Portage</i>	15	56
<i>Porter</i>	0	3
<i>Sheriff's Dept.</i>	39	7
<i>Valpo</i>	25	23
TOTAL	106	116

End of Year 2 Update:

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Final Update (end of Year 3):

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C. Goals:

1. Decrease the use of tobacco, drugs, alcohol and other mood-altering substances in Porter County.
2. Increase and/or maintain substance use preventative initiatives in our schools and community.
3. Educate parents on substances, use, signs of use, intervention techniques, consequences, and resources in the community.

End of Year 1 Annual Benchmarks:

1. The use of mood-altering substances by youth in Porter County is on the decline, except for marijuana. We continue to support efforts to decrease use and work on raising the perception of harm about marijuana for our youth.
2. We continue to support preventative initiatives in the schools. Monies spent in prevention are cheaper and more wide-ranging than more indicated or selected in other areas.
3. We will continue to provide and support programming for parents on how to recognize the signs of use, intervention techniques that are available and resources available.

End of Year 2 Annual Benchmarks:

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Final Report (end of Year 3):

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D. Objectives:

1. Support preventative substance abuse measures, *focusing on the 12-14 year old age group.*
2. Encourage Porter County schools to implement student assistance programs which focus on “students at risk”.
3. Educate parents on substances, use, signs of use, interventions, techniques, consequences, and resources in the community.
4. Form support groups in our schools and/or community for children of substance abusers.
5. The criminal justice system and the local schools will collaborate to assist in decreasing substance use by our youth.
6. Provide information for parents about community resources which focus on programs for children.
7. Support preventative substance abuse measures to reduce opiate use/abuse.
8. Encourage the formation of support groups for minor children of substance abusers and youth in recovery.

End of Year 1 Update:

1. We provided grant funding for several programs this year – and all but one of them addressed this age bracket.
2. Porter County schools are beginning to implement student assistance programs.
3. We provide education through several channels. We have the Resource Guidebook. This is available in paper copy as well as electronic and is on our website. We offer trainings throughout the year such as the Blunt Truth about Marijuana, Town Hall and the Red Ribbon Campaign.
4. This objective is a work in progress.
5. The criminal justice system and local schools are collaborating and are working towards reducing substance abuse. The decreasing number of juvenile arrests is a testament to their success.
6. The PCSAC Parent Guidebook was substantially updated. The paper copy was distributed to parents of all 6th grade students. In addition, an electronic copy was made available to all schools to place on their websites.

7. We continue to support preventative measures. We do this through education, speaking engagements in the community and specifically at the schools and through our Red Ribbon Campaign, Drunk Driving Task Force and a training for emergency nurse personnel.
8. We continue to work on this goal.

End of Year 2 Update:

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Final Update (end of Year 3):

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A. Problem Statement #4: A lack of collaboration hinders efforts to fight substance abuse in Porter County.

B. Supportive Data: Quality of Life Indicators Report, 2012

1. “The region needs to take a cooperative, regional approach to public safety. The region is greatly hampered by factionalism between agencies and jurisdictions and in some cities and towns mistrust exists between police and the community.” Quality of Life Indicators Report, 2012.
2. “Our county needs a collaborative and comprehensive approach to addressing this problem (substance abuse). There is good work being done around the county but it is not connected to an overall vision or strategy.” Barb Young, Porter County Community Foundation.
3. “We have more that unites us than divides us,” Dennis Rittenmeyer, Executive Director of One Region, “I have got to try to get people to play nice in the sandbox and try to get something done.” May 17, 2013.

End of Year 1 Update:

1. There continues to be work that needs to be done to foster a cooperative approach to public safety. In today's culture there continues to exist some mistrust between police and the community on both the national scene and locally in Porter County as evidenced by local television and newspaper media.
2. Good work continues to be done around the county to combat substance abuse. It is believed that comprehensive approaches do exist with both vision and strategy. However, there continues to be needed collaboration between existing agencies within the county.

3. The Porter County Substance Abuse Council feels strongly that all entities within the county can work together to combat substance abuse. The council has focused on welcoming all members and fostering a culture that all members matter.

End of Year 2 Update:

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Final Update (end of Year 3):

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C. Goals:

1. The Porter County Substance Abuse Council will partner with all relevant parties including our members, families, media, government, agencies, business, fraternal organizations and others with a community-focused goal of a significant decrease in substance abuse.

End of Year 1 Annual Benchmarks:

1. The council boasts coalition members from areas of business, justice, treatment, education and many other sectors of the community all with the goal to significantly reduce substance abuse. The Porter County Substance Abuse Council has worked closely with our sister coalitions from both LaPorte and Lake Counties. In the past year, the coalition has made a concerted effort to build and diversify its member base. In addition, the coalition has partnered with the local Results Based Accountability Initiative to identify substance abuse needs within the community based on shared data to reduce substance use and abuse.

End of Year 2 Annual Benchmarks:

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Final Report (end of Year 3):

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D. Objectives:

1. Professionalize the Porter County Substance Abuse Council.
2. Bring experts and expertise into the Council and the Community.
3. Create a community-wide response to address the legalization/decriminalization of marijuana.

End of Year 1 Update:

1. Over the past year, the Substance Abuse Council sought to professionalize by initiating a Member Commitment Contract in an effort to spell out both expectations and benefits of membership in the coalition. In addition, there has been an increase in efforts to make all aspects of the coalition more transparent in its daily operations and decisions.
2. The Substance Abuse Council has stepped up efforts to increase membership with individuals who are standouts in their respective fields and/or in the community. This effort has been more concentrated than ever before.
3. The creations of a community-wide response to address the nationwide legalization/decriminalization of marijuana is a newly added objective that was born out of the recent push to make certain uses for marijuana legal and, in various states, to completely decriminalize its use. As a member of the Governor's Commission for a Drug Free Indiana and a recipient of Federal dollars we will continue to support the position that marijuana is illegal.

End of Year 2 Update:

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Final Update (end of Year 3):

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Next Annual Update Due: 2014

Next Comprehensive Community Plan Due: 2016

Date of Community Consultant Review:

Disclaimer:

You agree that the information provided within this Plan is subject to the following Terms and Conditions. These Terms and Conditions may be modified at any time and from time to time; the date of the most recent changes or revisions will be established by the Commission and sent electronically to all Local Coordinating Councils.

Terms and Conditions:

The information and data provided is presented as factual and accurate. I hereby acknowledge that I can be asked to submit proper documentation regarding the data submitted within the Plan. Failure to do so could result in a “denied approval” by the Commission under IC 5-2-6-16.

The Local Drug Free Communities Fund must be spent according to the goals identified within the plan. I hereby acknowledge that I can be asked to submit proper documentation regarding funds that are collected, allocated, and disbursed within the county. Failure to do so could result in a “denied approval” by the Commission under IC 5-2-6-16.

Initials: bo